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## BIB DATA SHEET

CONFIRMATION NO. 4934

| SERIAL NUMBER | FILING or 371(c)<br>DATE<br>RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
|---------------|----------------------------------|-------|----------------|---------------------|
| 10/582,330    |                                  | 175   | 1793           | 070456-0115         |

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/JP04/18011 12/03/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

JAPAN 2003-412648 12/11/2003

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

08/24/2007

| Foreign Priority claimed       | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | STATE OR COUNTRY                             | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|--------------------------------|---|--|-----------------|--------------|--------------------|
| 35 USC 119(a-d) conditions met | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance |                 |              |                    |
| Verified and Acknowledged      | /SHENG HAN/<br>Examiner's Signature                                 | Initials                                     | JAPAN           | 0            | 21                 |

**ADDRESS**

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**TITLE**

High-Hardness Conductive Diamond Polycrystalline Body and Method of Producing the Same

|                                    |   |  |
|------------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>2010 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                            |
|                                    |   | <input type="checkbox"/> 1.16 Fees (Filing)                  |
|                                    |   | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
|                                    |   | <input type="checkbox"/> 1.18 Fees (Issue)                   |
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